

# **I Know How it Feels: A Voice-hearing Simulation to Enhance Nursing Students' Empathy and Self-efficacy**

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This thesis is submitted in fulfilment of the requirements for the degree of Doctor of  
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## CERTIFICATE OF ORIGINAL AUTHORSHIP

I certify that the work in this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as part of the collaborative doctoral degree and/or fully acknowledged within the text.

I also certify that the thesis has been written by me. Any help that I have received in my research work and the preparation of the thesis itself has been acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

Signature of Student:

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Date: 17.11.17

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# **ABSTRACT**

## **Introduction**

There is evidence that nurses do not routinely discuss voice-hearing experiences with mental health care consumers despite its importance for recovery-focused nursing practice. One way to address this shortcoming is the use of an experiential voice-hearing simulation workshop (VHS).

## **Aims**

The aims of the study were to: determine whether an experiential VHS increased nursing students' empathy and self-efficacy to discuss consumers' experiences of voice-hearing immediately after the VHS and at six-month follow-up, and identify concerns students had about talking with consumers about their voice-hearing experiences.

## **Method**

A concurrent mixed methods study was undertaken with 370 final year nursing students who participated in a VHS workshop. Quantitative and qualitative data were collected from participants using a survey before and after the VHS, and at six-month follow-up. The survey instrument comprised demographic and other questions, a measure of empathy, a measure of self-efficacy to communicate, and open-ended questions related to the VHS experience. Additional qualitative data were collected via focus group three months post the VHS.

## **Results**

Analysis of the quantitative data revealed that nursing students' confidence to talk about voice-hearing experiences increased significantly after participation in the VHS and at six-month follow-up, with empathy significantly increased at follow-up for: females, those in whom English was an additional language, for those whom had no prior nursing or other tertiary education qualification, and those whose family members did not have a mental illness. Prior to the VHS the participants expressed concerns

about interacting with consumers who hear voices. After the VHS they reported increased awareness of the effects of voice-hearing, less concerns about consumers who hear voices, and increased feelings of empathy for them. Further, the students expressed increased confidence to talk with consumers about their voice-hearing experiences, with many practicing this during their mental health clinical placements.

## **Discussion and Conclusion**

The use of experiential learning principles contributed to development of the participants' understanding of voice-hearing and its effects on consumers. The level of realism of the simulation experience aroused emotions in the participants and contributed to their development of empathy and confidence when interacting with consumers who hear voices. This study identified the need for the further development of communication skills, specifically addressing consumers' voice-hearing experiences. This study highlights the utility of VHS to increase and sustain nursing students' empathy for, and confidence to communicate with, consumers who hear voices, and it is recommended for the educational preparation of all health professions students.